

and bowels has been such as to interfere with all treatment, and with the taking of the most simple food, and where, consequently the emaciation and debility have rapidly increased, I have found the saccharated solution of lime, in doses of from twenty to thirty minims, three times a-day, prove of signal service. And it has appeared to me to act, not merely as an antacid, but as a tonic. I think it, therefore, extremely probable that the hypophosphite of lime will prove in many cases a useful remedy in the treatment of phthisis, acting beneficially on the stomach and intestinal mucous membrane, and, as Dr. Churchill affirms, on the pulmonary mucous membrane, diminishing the expectoration, and giving tone to the capillaries.

"But I am bound to say, that I have seen no more evidence of any specific anti-tubercular action exerted by the salt of lime than by the soda salt. No one will be inclined to question the great value of tonics in the treatment of phthisis, and among the poor, or those who have either neglected or mismanaged themselves under the false notion that tonics and good living are not suited to the cough, and other symptoms attendant on phthisis, it is often marvellous to observe the rapid improvement, and, perhaps, apparent cures, that follow on the administration of tonics. But it is not less true, that we meet with many cases of phthisis where tonics are not borne, and where their action is even highly injurious. This is especially the case with steel, which is often very injudiciously given. A trial of the hypophosphites may be useful in elucidating the benefit that accrues, in many instances, from a temporary or even an entire, abandonment of all tonics, and adherence to regulated diet, and all the various hygienic means, of such paramount importance in the management of all cases of tubercular disease."

11. *Action of Liquor Potassæ upon Phthisis.*—In our No. for Jan. last, p. 261, we gave the results of some trials made by Dr. R. P. COTTON, Physician to the Hospital for Consumption, to ascertain the effect of hydrochloric acid on consumption. This careful observer has lately published (*Med. Times and Gaz.*, April 13th, 1861) some experiments on the (chemically) opposite treatment by a pure alkali, on the same number (25) of unselected hospital patients.

He "administered fifteen minims of liquor potassæ two or three times a day, sometimes slightly increasing each dose. Of the patients ten were males and fifteen were females; their ages varied from fifteen to forty years; eight of them were in the first stage, four in the second stage, and thirteen in the third stage of the disease.

"Of the twenty-five cases, two slightly improved; one greatly improved; and twenty-two appeared to be uninfluenced by the treatment. In only one instance, however, did it disagree with the stomach; in all the rest it seemed to be inoperative either for good or harm. In the two slightly improved cases quinine and iron were afterwards administered with a more satisfactory result; and in the one greatly improved, the liquor potassæ was changed for a vegetable tonic, without any alteration in the general progress. Eight patients gained slightly in weight; nine lost weight; and eight experienced no change in this particular.

"Of the twenty-two patients in whom the liquor potassæ seemed inoperative, nine improved under a change of medicine, some of them, indeed, to a marked extent; thirteen, however, experienced no amendment under the like change, being apparently in a condition of disease hardly amenable to any kind of treatment.

"With this result, it may be interesting to couple a statement contained in the preceding report, that four patients who had been deriving benefit under the influence of *dilute hydrochloric acid*, unhesitatingly declared that they progressed to a much less extent during the brief period in which this remedy had been experimentally changed for *liquor potassæ*.

"In the days of some of our professional ancestors, liquor potassæ enjoyed a considerable reputation as a remedy in phthisis, from its supposed so-called "deobstruent" action. Of late years, however, it has fallen, I believe, comparatively into disuse, and is not often prescribed, except perhaps to meet an occasional complication.

"To these experiments, as well perhaps as to some which have preceded them, it may possibly be objected, that the period of trial was not sufficiently prolonged. From a conviction, however, that the time spent within an hospital is too valuable to the patients to be unnecessarily sacrificed to experiment, it has always been my habit not to persist with any one treatment for a longer period than two or, at most, three weeks, whenever it appeared that the patient was deriving no benefit, or when it seemed probable that the use of some other medicine might be followed by a happier result.

"It would be foreign to the object of this communication to enter upon the action of any of the salts, either of potassa or the other alkalies. I may briefly remark, however, that for certain dyspeptic complications of phthisis, several of these rank very highly as remedial agents.

"From the preceding observations, coupled with the results already obtained from the use of hydrochloric acid, as recorded in my last communication, I think we may fairly arrive at the following conclusions:—

"1. That liquor potassæ, in moderate doses, rarely disagrees with consumptive patients, but is quite as rarely productive of any good effect.

"2. That the so-called tubercular *crisis* is very much more likely to be relieved by the mineral acids than by the alkalies."

12. *Influence of Ozonized Cod-liver Oil on the Pulse.*—Dr. E. SYMES THOMPSON read an interesting practical paper on this subject, before the Royal Med. and Chirurgical Society (Feb. 26th, 1861). He commenced by reminding the society of a paper by his father, Dr. Theophilus Thompson, published in the *Transactions*¹ (vol. xlii.), in which the attention of the profession was first drawn to this subject. He recorded the cases of about twenty patients at King's College Hospital, to whom the ozonized oil was administered. The usual dose was two drachms twice a day. Scarcely any effect was observed from doses of one drachm. The influence of the oil on the pulse increased in proportion to the dose in which it was given, the effect of half-ounce doses, two or three times a day, being more marked than that of smaller quantities. The following table exhibits, as simply and concisely as possible, the results:—

Table showing the Changes of Pulse under Ozonized Cod-liver Oil.

Name.	Sex.	Disease.	Time of taking Oil.	Pulse.	
			Days.	Before.	After.
J. P.	M.	Phthisis, first stage.	7	116	98
J. S.	M.	Ditto.	7	120	108
W. B.	M.	Tuberculous larynx.	21	112	92
M. H.	F.	Phthisis, second stage.	7	80	80
E. A. W.	F.	Ditto.	14	140	112
C. H.	F.	Phthisis, first stage.	14	100	104
R. N.	M.	Phthisis, third stage.	7	150	116
E. D.	M.	Phthisis, second stage.	7	138	112
J. O'D.	M.	Emphysema.	4	104	86
M. M.	F.	Phthisis, second stage.	5	140	108
E. R.	F.	Anæmia.	4	120	116
M. S.	F.	Phthisis, third stage.	2	94	92
E. H.	F.	Phthisis, second stage.	10	104	88
W. S.	M.	Phthisis, first stage.	7	104	104
P. R.	M.	Phthisis, third stage.	4	104	96
S. E.	F.	Phthisis, second stage.	20	120	92
G. M.	M.	Phthisis, third stage.	4	140	120
H. C.	F.	Phthisis, first stage.	2	108	95
W. H.	M.	Phthisis, first stage.	5	120	96
J. R.	M.	Phthisis, first stage.	9	120	98

¹ See No. of this Journal for Oct. 1859, p. 529.